

NEAS: Strategic plan 2015-2020

Unmatched quality of care, every time we touch lives

Why are we refreshing our strategic plan?

The NHS continues to be a complex operating environment and to ensure we continue to meet the needs of our patients, commissioners and our staff, every year we review our strategic direction and supporting delivery plans to ensure they are effectively aligned.

Over the last year we have experienced mounting pressures on our urgent and emergency care system, to the point where achieving performance has been more of a challenge. We have welcomed the national response which has called for a

'fundamental shift in the way urgent and emergency care services are provided to all ages, improving out of hospital services so that we deliver more care closer to home and reduce hospital attendances and admissions.'

Our strategic plan has been refreshed to reflect the changes that are needed to redesign urgent and emergency care. This is our core business and the reforms put ambulance services at the centre of such provision.

Our strategic plan sees us take on this challenge, as well as put forward a wider programme of transformation to achieve a sustainable service of the future and one that makes NEAS a great NHS employer.



A bit about us

The North East Ambulance Service NHS Foundation Trust covers an area over 3,200 square miles and we employ just over 2,500 staff, serving the 2.7 million population of the North East. We are one of 10 ambulance trusts in England and currently one of five ambulance foundation trusts. Our partners include 10 Clinical Commissioning Groups (CCGs), two mental health foundation trusts, eight acute foundation trusts, NHS England, the North of England Commissioning Support Unit, our local Police and Fire services and 12 local authorities. We also work closely with the Great North Air Ambulance, St John Ambulance Service and the British Red Cross.

Our vision for the future



It is our **vision** to provide unmatched quality of care, every time we touch lives

It is our **mission** to provide safe, effective and responsive care for all

Type of care provided by the Trust

<p>999 Emergency Care</p>	<p>We receive over 400,000 emergency calls every year leading to the prioritising and responding to approximately 380,000 incidents. These include; 8 minute responses to patients requiring life-saving treatment; up to four hour responses to patients who have a less serious condition that is not life threatening; transport of patients who require direct admission to hospital following a GP assessment; and transport of patients who require a paramedic to ensure their safe transport to hospital for planned treatment.</p>
<p>HART</p>	<p>We operate a Hazardous Area Response Team (HART). This team is replicated nationally in all other ambulance services and it works alongside other emergency services at the centre (or 'hot zone') of serious accidents</p>
<p>Emergency Planning</p>	<p>Our emergency planning function prepares and maintains plans for all major incident scenarios, including flooding or terrorism. We are required to provide this service under the Civil Contingencies Act 2004 and we work with our three local resilience forums to ensure the safety of our local populations.</p>
<p>MERIT</p>	<p>Our Medical Emergency Response Incident Team is a new service commissioned for 2015. It involves the dispatch of a team made up of a trauma doctor and paramedic.</p>
<p>Patient Transport Services</p>	<p>Patient Transport Services provides transport to patients requiring health care and treatment or discharge support from hospital. They undertake over 700,000 patient journeys every year.</p>
<p>NHS 111</p>	<p>We provide the NHS 111 service to the North East region which receives in excess of 2000 calls every day,</p>

Through our strategy we aim to:

- Drive and shape the future of urgent and emergency care services through effective integration and collaboration.
- Achieve sustainable service delivery and ongoing improvements, whilst protecting best practice and quality standards through optimum use of all available resources.
- Nurture a consistent culture of compassion that values and supports staff to deliver exceptional care to patients.



Where are we now?

The 2.7 million population of the North East is growing and as a whole it continues to have higher than average health challenges caused through lifestyle choices, high levels of deprivation and an ageing population. There are disparities in life expectancy between sexes. Early death from cancer, heart disease and stroke has fallen across the North East, but still remains substantially higher than the rest of the UK.

- The patients we see have more complex conditions; our emergency (red rate) activity has increased by 10% over the last year, some of which was due to including more patient conditions in our red response category.
- We are seeing higher demand for NHS 111 services; receiving 2,005 calls per day, compared to 1,870, since the full service went live in 2013.
- We are dealing with significantly more emergency patients over the phone than ever before.
- We also support the flow of patients through hospital by undertaking a lot more same day transport requests. This is putting our patient transport service under pressure; same day have increased by 20% in some areas.
- We have already started to upskill our workforce and by the end of 2016 half of our Paramedic workforce will be trained in Enhanced CARE and will be able to deal with many patients on scene or in their own home. We have put a platform in place to develop a clinical hub which will grow to house a range of experts within our contact centre, to further provide immediate advice to patients and health professionals.

The health challenges the North East faces are evident in the growing demand, and service patterns are also changing:



Developing NEAS for the future

Enhanced triage and assessment – mobile healthcare

Through training we will further develop the workforce. We will introduce advanced practice in critical care and evidence based Point of Care Testing to support diagnosis and increased clinical intervention on scene.

- Increased see and treat responses through the upskilling of our core workforce and the ongoing development of our newly Advanced Practitioner role
 - Specialist emergency care, continually developing life-saving treatments
 - Increased care close to home
 - Reduced conveyances to hospital and subsequent admissions
-

Integrating Care and Transport (ICaT)

We are re-configuring our resource base to span across Patient Transport Services and Emergency Care. They currently operate as two discrete services. We need to change our operating systems to facilitate access to a single service model with no access barriers to any type of resource, responding appropriately to both scheduled and unscheduled care 7 days a week.

This development is to enhance our responsiveness and therefore patient safety, through more effectively matching the demand we are facing, in terms of acuity and need, with a more targeted clinical skill-set and vehicle resource type.

- Use of alternative vehicles to convey patients to hospital
- Timely responses to patients who are at the end of their life
- Timely responses to patients with mental illness
- 7 day patient transport supporting effective hospital flows
- Working together with hospital partners to enhance pre-planning of discharges and transfers

Developing a Clinical Hub

As an effective single point of access NHS 111 is being designed to be the '**smart call to make**' signposting people to health and social care services. We expect the volume of calls to continue to grow and anticipate answering close to one million calls per annum by 2020

The concept of a 'clinical hub' to support 999 and NHS 111 services has taken on different forms up and down the country. Our vision is to build on the work already undertaken here in the North East, not only to expand what we have in place, but develop a more wide ranging hub that eliminates the need for patients to access other provider services and enables patients to be fast tracked to a relevant service or central care co-ordination point.

Our patients would still be safely screened through NHS Pathways for life threatening conditions or emergencies, but the holding of a comprehensive care plan would trigger a transfer to the clinical care hub for further triage or through triage where a pathway outcome could be dealt with in-house i.e. a mental health practitioner in the hub providing advice and reassurance and making a follow up referral appointment.

The clinical hub is in design, based on the principle to provide better support for people to self-care and to provide access to professionals and their advice and support, including Dental nurses, Mental Health nurses, GPs and Advanced Practitioners (upskilled Paramedic/Nurse providing mobile healthcare); a Social Work Service and an End of Life Care Co-ordinator.

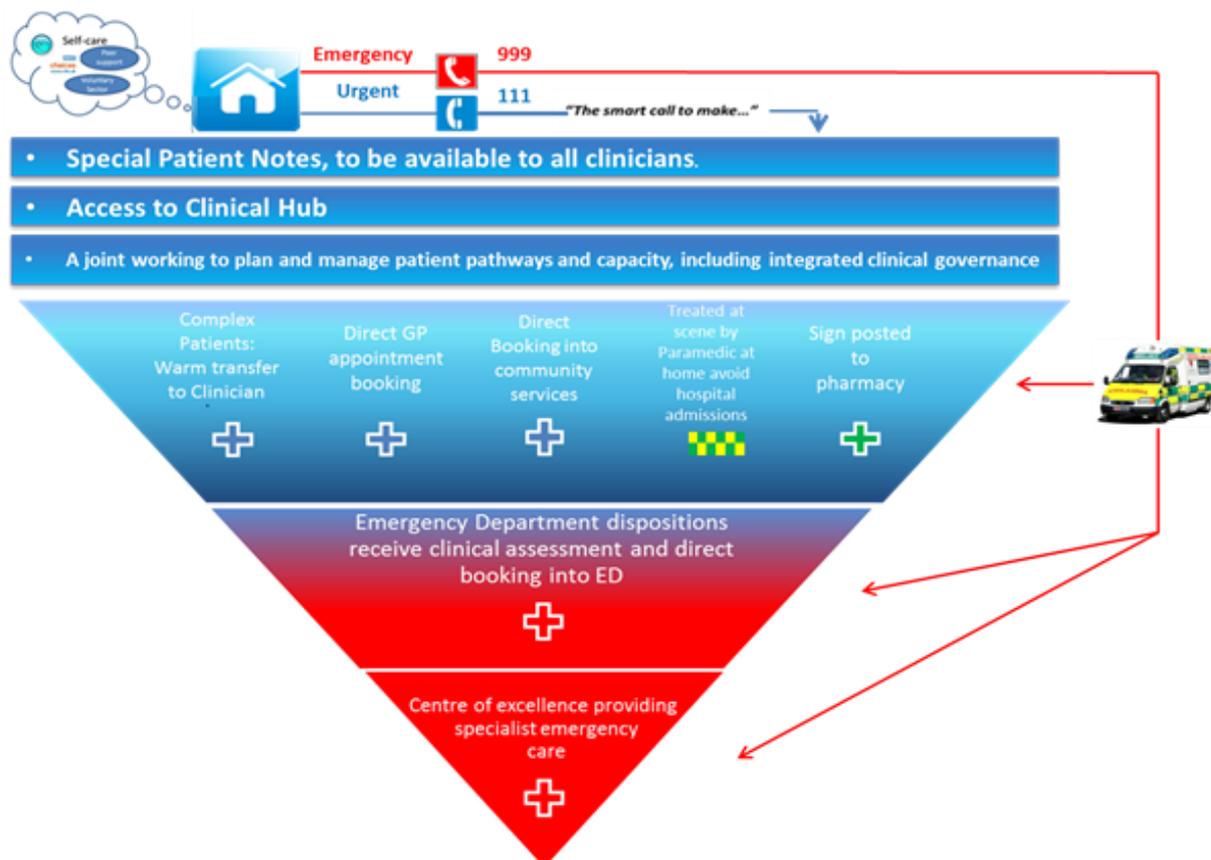
Access to a rich mix of professionals is to be made available to other healthcare professionals, including front-line paramedics, to help them fast-track and make decisions for their primary/community patients in real time.

Benefits for Patients

- Direct GP appointment bookings
- Direct booking into community services
- Seamless booking of transport
- Access to relevant patient information and records to inform clinical decision making
- Transfer of patient calls to experts for specialist advice
- Advice to other health professionals– no decision taken in isolation
- Signposting to self-care programme
- Telehealth monitoring



The shape and structure of the future urgent and emergency care system



Integration and collaboration – working together to deliver

We will:

Build and strengthen resilience working with our local communities

Design and develop new pathways in partnership, securing access to services and designing alternatives to emergency departments

Support the public health agenda, working with partners to develop innovative preventative schemes such as Falls prevention.

Use our regional urgent and emergency care network to drive urgent and emergency care reform across the region.

3 key drivers for our strategy:

External reform as identified through the Five Year Forward View, Urgent & Emergency Care review and the launch of new Vanguard.

Internal reform through our transformation projects including integrating our care and transport and developing a clinical hub.

Making NEAS a great place to work and putting our employees at the heart of how we do things.

A drive for quality

Our plans to drive through quality improvements are through a number of key strategies.

Making NEAS a great place to work-putting our employees at the heart of how we do things

- Strong leadership
- Comprehensive training and career development programmes
- Well configured staffing establishment and skill mix
- Effective continued professional development
- Effective health and wellbeing programmes
- Caring and compassionate support
- Embedded and strong clinical supervision and mentorship
- Achieving the Investors in People standard
- A culture that provides the highest standard of care for our patients

Clinical developments

- Successful research and development programmes
- Pathway developments
- Advanced practice in clinical care
- Point of Care Testing
- Introduction of pre-hospital treatment for Sepsis
- Clinical audit

“Our staff are our strongest asset, and we know from experience and results of our surveys that the services provided by our staff are rated ‘second to none’.”

Yvonne Ormston, Chief Executive

Setting and monitoring of performance standards

- New governance structure
- Learning from listening; staff; patients; service users

Introducing new technologies

- New electronic patient care record which will ‘release time to care’ and facilitate smoother clinical handovers
- Sharing more information to inform clinical decision making
- New medicines management solution which will ‘release time to care’

How to provide your feedback

[Please click here to take part in an online survey.](#)